

# All My Sons

## Audition Registration Form

<b>Full Name:</b>	
<b>Age and Date of Birth:</b>	
<b>Height – (Feet &amp; inches):</b>	



**What previous performance experience do you have? Are you in any groups/choirs?**

Address:	
Post Code:	
Tel:	
Email address:	
Have you checked the rehearsal and performance dates and are there any days you cannot do?	

**I give my permission to be filmed and photographed for press/show promotion purposes.**

**(Please sign here)..... Date:.....**

**Rose Theatre, Kingston-upon-Thames, KT1 1HL**

**Please return this form asap to:**

**[rebeccat@rosetheatrekingston.org](mailto:rebeccat@rosetheatrekingston.org)**

**Auditions will be allocated on a first come first served basis**